Supplemental Independent Expenditure Report (Government Code Sections 84203.5) SEE INSTRUCTIONS ON REVERSE	Type or print in ink. Amounts may be rounded to whole dollars.	Report covers pe	eriod Date Stamp	CALIFORNIA 46
Amendment No	Amendment (Explain Below)	Date of election if an (Month, Day, 11/07/2	2006 Sari Jose City Clerk  pplicable: Year)  2016 OCT 27 A 9: 30	1/3 For Official Use Only
1. Committee/Filer Information  NAME OF FILER SAN JOSE FIREFIGHTERS POLITICAL ACTION CO	I.D. NUMBER (if recipient committee) 743393 OMMITTEE		(If recipient committee)	
425 E. Santa Clara Street Suite 300 San Jose CITY STATE ZIP COI San Jose OPTIONAL: FAX/E-MAIL ADDRESS	DE AREA CODE/PHONE	OPTIONAL: FAX/E	STATE ZI E-MAIL ADDRESS	P CODE AREA CODE/PHONE
2. Name of Candidate or Measure Suppose NAME OF CANDIDATE  NAME OF BALLOT MEASURE		OFFICE SOUGHT OR HELI BALLOT NO /LETTER	JURISDICTION	CHECK ONE SUPPORT OPPOS

3. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

Please see attached pages

## Supplemental Independent Expenditure Report

Type or print in ink.
Amounts may be rounded
to whole dollars.

	SUPPLEME	NTAL INDEPENDENT EXPENDITURE
Rep	ort covers period	CALIFORNIA / CE
from	07/01/2006	1994 FORM TUJ
through _	10/21/2006	2/3

		110111				***************************************
SEE	INSTRUCTIONS ON REVERSE	through	10/21/2006	6		2/3
	ME OF FILER			I.D	. NUMBER	(If Recipient Com.)
	SAN JOSE FIREFIGHTERS POLITICAL ACTION COMMITTEE					743393
4.	Summary					
	1. Total independent expenditures made of \$100 or more this period. (Part 3)				\$	10596.88
	2. Total independent expenditures under \$100 made this period. (Not itemized.)				\$	0.00
	3. Total independent expenditures made this period (Add Lines 1 + 2.)					10596.88

5. Filing Officers Enter the official title and address of each filing officer with whom most recent campaign statements have been filed.

Please see attached pages

## 6. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on	By Keith Keesling SIGNATURE OF TREASURER OR ASSISTANT TREASURER
Executed on	By
Executed on	BySIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT
Executed on	BySIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

## Supplemental Independent Expenditure Report

(Government Code Sections 84203.5)
SEE INSTRUCTIONS ON REVERSE

Type or print in ink.
Amounts may be rounded to whole dollars.

Report covers period from \_\_\_\_\_\_07/01/2006

through

10/21/2006

CALIFORNIA 465

3/3

SUPPLEMENTAL INDEPENDENT EXPENDITURE

**Date Stamp** 

For Official Use Only

For use by an officeholder, candidate, or committee making independent expenditures totaling \$500 or more in a calendar year to support or oppose a single candidate or a single measure. This form must be filed at the same times and places as the campaign statements filed by the candidate supported or opposed or by a committee primarily formed to support or oppose the measure. A separate form must be filed for each candidate or measure being supported or opposed. This form is filed in addition to any other required campaign statements.

3. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.						
DATE	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT	CALENDAR YEAR (JAN.1 - DEC.31)		
10/06/2006	Firefighters Print & Design 1780 Creekside Oaks Dr.	Mailings for Jim Spence for City Council	5298.44	5548.44		
	Sacramento Ca 95830 Reference No:					
10/06/2006	Firefighters Print & Design 1780 Creekside Oaks Dr.	Payment in support of Manny Diaz for city council.	5298.44	7793.42		
	Sacramento CA 95830 Reference No:					